## S 17

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 2636 OF 4594	
ITEMIZED RECEIPTS			for each category of the	(check only one)	
			Detailed Summary Page	11a 11b 11c 12 13 14 15 16 <b>x</b> 17	
				person for the purpose of soliciting contributions	
or	for commercial purposes, other than using the	name and a	ddress of any political committe	e to solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) The Lincoln Project				
Α.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Moritz, Michael, , ,			Date of Receipt	
	Mailing Address 2800 Sand Hill Rd			10 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City Menlo Park	State CA	Zip Code 94025-7055	Transaction ID: 20513113	
		- OA	94025-7055	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500000.00	
	Name of Employer (for Individual)  Sequoia Capital  Occupation (for Individual)  Venture Capitalist			Memo Item	
	Receipt For:	Aggregate Year-to-Date ▼			
	Primary General Other (specify) ▼		500000.00	Non-Contribution Account	
В.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  Morris, Abbie, , ,			Date of Receipt	
	Mailing Address 11184 Champagne Point Rd NE			11 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: 20189351	
	Kirkland	WA	98034-3409	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		300.00	
	Name of Employer (for Individual) Not Employed	Occi	upation (for Individual) ired	Memo Item	
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		300.00	Non-Contribution Account	
<u> </u>	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  Morse, Amy, P., ,			Date of Receipt	
	Mailing Address 46 Woodcut Ln			07 20 2021	
	City	State	Zip Code	Transaction ID : 19383872	
	Manhasset	NY	11030-2519	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		26.12	
	Name of Employer (for Individual) Healthcare		upation (for Individual)	Memo Item	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 26.12	Non-Contribution Account	
s	SUBTOTAL of Receipts This Page (optional)			500326.12	
Т	OTAL This Period (last page this line number	only)			